

## PART B - FEE(S) TRANSMITTAL



Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571) 273-2885

	INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block I, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.							
	CURRENT CORRESPONDENCE 20349 7. POLAROID CO.	Fee(s) Transmittal. This certificate cannot be used for any other accompapers. Each additional paper, such as an assignment or formal drawin have its own certificate of mailing or transmission.					for any other accompanying ent or formal drawing, must	
	PATENT DEPAR' 1265 MAIN STRE WALTHAM, MA	MON S & JUNY			Certificate of Mailing or Transmission  I hereby certify that this Fec(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
11/	28/2005 GWORDOF2 0000	36 FRANCE PRODUCTION			Gaetano D	. Maccarone	(Depositor's name)	
02 i	C:1501 1400.00 C:1504 300.00 C:8001 12.00				November November	22. 2005	(Signature)	
	APPLICATION NO.	F	FIRST NAMED INVENTO		TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
	09/748,586	12/22/2000	Bruce K		. Johnson		8470/PMC	2671
	TITLE OF INVENTION: DIGITAL IMAGING DEVICE							
	APPLN, TYPE	SMALL ENTITY	ISSUE FE	ISSUE FEE		BLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
	nonprovisional NO		\$1400			\$300	\$1700	01/04/2006
	EXAMINER		ART UNIT		CL	ASS-SUBCLASS		
	GRANT II, JEROME		2626			358-530000		
	I. Change of correspondenc CFR 1.363).  Change of correspond Address form PTO/SB/1:  "Fee Address" indicat PTO/SB/47; Rev 03-02 ( Number is required.	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to						
	3. ASSIGNEE NAME AND	ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)						
		PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.						
(A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  POLAROID CORPORATION  Waltham, Massachusetts								
Please check the appropriate assignee category or categories (will not be printed on the patent): Individual XX Corporation or other private group entity Government								oup entity Government
	4a. The following fee(s) are enclosed:  4b. Payment of Fee(s):							
Issue Fee A check in the amount of the fee(s) is enclosed.								
						card. Form PTO-2038 is attached.		
	XXAdvance Order - # of Copies 4						credit any overpayment, to copy of this form).	
5. Change in Entity Status (from status indicated above)  a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).  The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignce or other par interest as shown by the records of the United States Patent and Trademark Office.								FR 1.27(g)(2).
								ation identified above. he assignee or other party in
	Authorized Signature Groben 22						November 22, 20	005
	Typed or printed nameGaetano D. Maccarone Registration No25,173  This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by							
	This collection of information	on is required by 37 CFR 1.3	11 The information	is required	to obtain	or retain a henefit by t	ha nublia which is to file (an	d bu the LICDTO to account

an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.